



PRESIDENT'S MESSAGE

Welcome to your newsletter.

In this issue, we present an overview of complaints considered and investigated by the Board over the last quarter. We share some observations about recent complaints, and provide suggestions on how complaints might be resolved with clients to avoid escalation to the Board.



In response to continued shortages of veterinary specialists, we outline available registration pathways for persons whose veterinary degrees do not qualify them for general registration. It should be noted that the Board is actively exploring ways of expanding pathways to registration, especially for international specialists.

Also, see the information on veterinary medicines shortages with resources on how best to approach these issues.

News from other stakeholders in the profession includes a position statement defining minimum standards for the monitoring of anaesthesia in companion animals from the ANZCVS Anaesthesia & Analgesia Chapter, and a new Sydney University online platform for surveillance and reporting of inherited diseases in animals. We also provide information about grants for veterinary nursing qualifications.

On the emergency disease front, be on the lookout for possible cases of Japanese Encephalitis Virus in pigs and horses this Spring. H5N1 avian influenza remains a threat to Australia, and we've included an update on preparations.

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President's message continued

October is Health and Safety Month in Victoria. This newsletter provides links to information, events and toolkits from WorkSafe Victoria to support employers and their staff.

It is also Cyber Security Awareness Month, with the theme 'Cyber security is everyone's business'. The Board encourages you, your colleagues and your business to take steps to secure your devices, test your business's cyber threat response and identify ways to improve the cyber security of your business.

Dr John Harte

President

COMPLAINTS OVERVIEW SEPTEMBER 2024 QUARTER

In the period July to September 2024, the Board received 72 preliminary calls and emails about the conduct of veterinary practitioners.

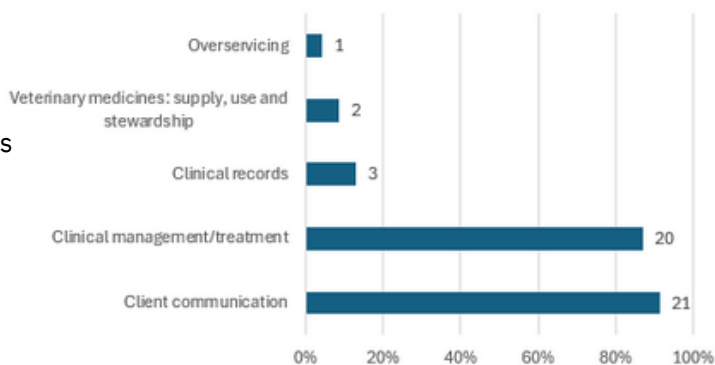
In the same period, 23 written complaints were submitted and considered by the Board. The main issues raised in these complaints were client communication (91%), clinical management of the animal (87%) and veterinary medical records (13%). Other issues raised were overservicing.

After assessing these 23 complaints, the Board determined:.

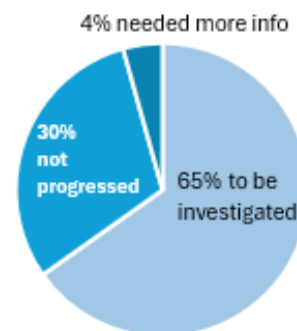
- 7 were lacking in substance and should not proceed further
- 15 were to be investigated
- more information was needed about one complaint.

During the reporting period, 19 investigations of complaints received in previous periods were finalised. Of these, 8 were finalised with no further action; 10 were finalised with an educative letter; and one was finalised with a warning, educative letter and requirement for the vet to write a reflective piece.

Key issues raised September 2024 quarter



Board action on complaints received September 2024 quarter



BOARD CASE INSIGHTS: OBSERVATIONS FROM RECENT COMPLAINTS

Dealing with complaints in a practice

We are aware of some practices escalating client complaints to management directly without consulting the relevant veterinary practitioners involved in the animal’s care.

We understand this approach may be aimed at supporting vets, enabling them to focus on delivering veterinary services; as well as managing any perceived legal liability. However, it may have the unintended consequence of escalating complaints where clients are already emotionally vulnerable:

- **Clients may think the vet has something to hide:** the vet knows and has the relationship with the client and the animal. Preventing clients from speaking with the vet may reduce the chances of resolving the complaint. Animal owners want to be listened to and treated with respect when they have a problem, and they may perceive exclusive escalation to management to be defensive.
- **Misinterpretation or miscommunication:** if a complaint is managed by a third party who was not present during the relevant events, important information may be missed or misinterpreted. This may confuse and/or frustrate clients.

- **Missed opportunity to provide further explanation:** where a veterinary practitioner handles a complaint directly in the first instance, they may be able to explain things again and more clearly to the animal’s owner - including what may have gone wrong and why. It is possible that the last time the client and practitioner spoke, the client may not have been in a state to understand what was said.
- **Missed opportunity to learn and develop:** it is natural to view complaints as criticism (and therefore a bad thing). However, a complaint can be viewed as an opportunity to receive feedback, provide further explanation (as above), as well as learn and develop crucial insights. Complaints also provide vets with opportunities to strengthen complaint handling competencies - core skills including empathy, patience, resilience, problem solving, the ability to remain impartial, and the ability to communicate and work with distressed and vulnerable clients.

As outlined above, excluding practitioners from the complaints process may mean that early resolution opportunities are lost and a complaint ultimately escalates to the Board. *Continued next page...*

CASE INSIGHTS CONTINUED

Dealing with complaints in a practice cont.

It is not suggested that complaints must be resolved alone. Rather, the whole veterinary team and management can be involved in the process and provide support to vets as required, especially where there may be concerns about the time being taken and the emotional toll of the complaint on the practitioner.

The Board also acknowledges that certainly there will be times when escalating a complaint to a person with dedicated complaint handling skills may be appropriate and necessary. This person may have other skills in addition to the core complaint handling skills listed above, including skills in investigation and dealing with unreasonable conduct, plus a broader knowledge of the business's people and work, and access to expert advice.

Referrals to specialists

In the past year, the Board has received several complaints involving events where a veterinary practitioner performed a surgical procedure without first considering whether seeking specialist advice or referring to a specialist was appropriate in the circumstances. Some of these cases involved a tibial plateau levelling osteotomy (TPLO).

In one case, a practitioner performed a TPLO on a large breed dog despite lacking sufficient experience to handle the complexities associated with the animal's size and condition.

It is crucial that veterinary practices foster an environment where practitioners are encouraged to recognise their limitations. While there is no formal obligation to refer a case, practitioners should carefully assess their own capabilities and what is in the best interests of the animal, and consider seeking advice from a specialist and/or suggesting to the animal owner that they see a registered specialist if the circumstances indicate it is necessary.

It is also essential that practitioners communicate to pet owners any limitations in their capabilities and associated risks, before proceeding with surgery.

Continued next column ...

By prioritising transparency, we can ensure that all animals receive the highest standard of care, ultimately benefitting patients, their owners and the veterinary practice.

More information:

- [Guideline 12: referrals between specialists](#)
- [Guideline 17: Emergency and specialist services](#)

Responding to requests from authorised officers such as RSPCA inspectors

Veterinary practitioners sometimes attend properties to deliver veterinary services after receiving a request from the RSPCA, Agriculture Victoria or other authorised officers such as wildlife officers.

Where there is any uncertainty about the legitimacy of a request, a veterinary practitioner is entitled to ask the requesting party to specify the legal rules under which they are requesting delivery of services (e.g. the relevant section of the POCTA Act or Regulations) and confirm that person's authorisation.

RSPCA Inspectors have a range of powers to enforce animal welfare law and investigate animal cruelty offences, including to enter property and seize evidence of animal offences.

Persons who attend a property to enforce a legal order may be met with hostility by the animal's owner and other persons at the property, posing a potential risk to the health and safety of any persons or animals present. It is also possible that attendance in these circumstances may result in a Board complaint.

Accordingly, veterinary practitioners may wish to ask the RSPCA Inspector or authorised person to attend also when veterinary services are delivered (where possible). Having an inspector or authorised person attend at the same time may provide support and assistance to the practitioner, not only on the day of attendance but also in case of a complaint to the Board or other proceedings.

BOARD CASE INSIGHTS CONT...

A reminder about off-site consultations

The Board recently investigated a complaint involving presentation of an animal to an off-site location where no facilities or assistance were available to help restrain the animal.

In line with Guideline 6.5 of the Board's Guidelines, a practitioner should ensure that the environment in which they provide veterinary services during an off-site consultation is suitable for the services to be delivered.

If the off-site environment does not allow for services to be provided to the expected standard, a veterinary practitioner should arrange alternative options, including consultation in a clinic with appropriate equipment.

NON-STANDARD PATHWAYS TO REGISTRATION: MUTUAL RECOGNITION AND "IDENTIFIED NEED"

Possible registration of persons with qualifications not generally recognised

There continues to be a shortage of veterinary personnel in Victoria, especially in regional areas but also in particular fields or specialities and at certain times of the year. For example, equine veterinarians are in high demand during the breeding and racing seasons.

Prerequisites for registration

Under the *Veterinary Practice Act 1997* (VPA), the usual pre-requisites for **general registration** as a vet in Victoria are that a person:

- has a recognised accredited qualification as listed by the Australasian Veterinary Boards Council
- has competency in English
- is in good professional standing, and
- has (or will have) a principal place of residence in Victoria.

Prerequisites for **specialist registration** as a vet in Victoria are that a person holds (or qualifies for) general registration, has the required post-graduate qualification in the relevant specialty and has been practising in that area of medicine or surgery.



YOUR LEGAL OBLIGATION TO UPDATE YOUR RESIDENTIAL & PRACTICE ADDRESS

Under section 19 of the *Veterinary Practice Act 1997*, 'A registered veterinary practitioner granted registration [under the Act] ... must notify the Board of any change of any address of the veterinary practitioner which appears on the register within 28 days after that change.' The Board has the power to impose penalties if addresses are not updated within the required timeframe.

Please sign into your account and ensure that your practice address is correctly recorded. Your residential address, email address and mobile number are also required (not made public).

For your practice address:

- if you are a locum practitioner, please record the name and address of the locum agency you work for
- if you are not working in clinical practice but your work requires you to be registered as a veterinary practitioner, please provide the name and address of your workplace
- if you are a solo practitioner without a physical veterinary premises, e.g. a mobile vet, put your business name in the practice name field and write, 'Practising from residential address' in street address line 1
- if you are treating your own animals, write 'Treating own animals' in the practice name field and put 'Practising from residential address' in street address line 1.

Options for persons with non-recognised qualifications

Employers are regularly approached by overseas-registered veterinarians who may have veterinary skills and experience and English competency, but do not have a qualification that is able to be recognised by the Board. Sometimes the prospective applicant is a specialist veterinarian in their own country.

In Victoria, persons whose veterinary qualifications are not able to be recognised may be able to be registered either through mutual recognition of other veterinary registration in Australasia or if their employer can show there is an identified need to employ a person with their skills.

Mutual recognition

Persons with non-recognised qualifications who are currently registered in another Australian State or

REGISTRATION PATHWAYS CONT.

Territory or in New Zealand may apply for registration under the *Mutual Recognition Act 1992* (if in Australia) or the *Trans-Tasman Mutual Recognition 1997* (if in New Zealand). Contact us for more information.

Identified need

Under section 7(1)(d) of the VPA, the Board may grant specific registration to an applicant whose veterinary qualifications are not recognised for general registration if it is of the opinion that, to meet an identified need for a veterinary practitioner, it is necessary for a person with qualifications like those of the applicant to provide veterinary services.

It is the Board's general practice to impose conditions on this type of registration, limiting practice to a specific employer under the indirect supervision of a registered veterinary practitioner. Specific registration can be granted for a maximum period of 3 years (though vets can apply for another period of registration before expiry of the current one).

A registration application under s7(1)(d) of the VPA should be accompanied by information from the applicant's prospective employer that:

- clearly describes a public or community need for veterinary services to be provided to animals, by a person with a specific skillset and/or in a location where the absence of a vet may negatively affect the public, community and/or health and welfare of animals
- explains the potential risks in not meeting the identified need, i.e., how the public, community and/or health and welfare of animals will be at risk if the position is not filled, and
- shows their efforts to fill the position that will meet the identified need with a person who would qualify to apply for general registration, e.g. evidence of advertising over a prolonged period.

Applicants must provide information which shows they have the knowledge (including English competency), skills and experience to meet the identified need.

The Board has a policy which provides guidance to employers and applicants and details the type of information which can be supplied to support such an application: [Identified need under section 7\(1\)\(d\) of the Veterinary Practice Act 1997](#).

Importance of undertaking due diligence and providing support

While the Board understands that employers may be eager to fill vacant positions, employers who are considering engaging a person who would need specific registration should carefully conduct appropriate due diligence.

Prospective employers must satisfy themselves that the applicant has the skills and experience to do the work required; and the English to understand and sufficiently communicate with clients, read clinical documentation and write veterinary medical records to the expected standard. More than this, the employer should try to establish whether the applicant is a good fit for their practice generally.

Due diligence of this sort is good practice for any prospective employee but even more important in cases where the vet may be relocating from another country at considerable financial and personal cost, often accompanied by their family. As there would be conditions on the vet's registration restricting them to practising at a specific workplace, it is not straightforward for a person in this situation to find another place to work if things don't work out with their employer.

For the same reasons, if a vet is granted specific registration to meet an identified need for their services, an employer should also be prepared to provide additional support at induction to help the vet settle into practice in Victoria. The registered veterinary practitioner appointed as supervisor can assist with this, but the whole veterinary team can play a role.

Application information:

- Check a potential employee's eligibility for registration: [Registration guide](#)
- Board policy: [Identified need - Specific registration under section 7\(1\)\(d\) of the Veterinary Practice Act 1997](#)
- [Specific registration application form](#)

Veterinary employers, please check that vets working in your practice are registered in Victoria via [Search for a Vet](#). Vets who have relocated from Queensland must apply for registration in the first week of December to be registered from 1 January 2025. **Application forms:** [General registration](#) or [Re-registration](#)

HEALTH AND SAFETY MONTH

In Victoria, October is Health and Safety Month, hosted by WorkSafe Victoria, with a series of in-person and online events to support employers. WorkSafe's WorkWell Toolkit has templates, policies and resources to help support employee mental health and a thriving workforce.

Health & Safety Month Events & Resources (WorkSafe)

- [Health and Safety Month events](#)
- [WorkWell Toolkit](#)

VETERINARY MEDICINE SHORTAGES

Disruptions due to global supply limitations, unexpected increases in demand, and manufacturing issues have resulted in shortages of several veterinary medicines.

Regarding the current status on shortages of intravenous fluids and feline core vaccinations:

- supply of IV fluids will continue to be constrained throughout 2024 (Therapeutic Goods Administration - TGA). The TGA has approved importation and supply of substitute overseas-registered IV fluids.
- supply of feline vaccinations may be resolving (Australian Veterinary Association - AVA).

The Board encourages veterinary practitioners to adopt conservation strategies, explore alternative treatment options and follow best practices for ensuring effective patient care during shortages.

As noted by the AVA, 'Products entering the market in response to the current supply shortage may not have been approved for veterinary or human medical use. While sometimes necessary, [there are inherent risks in using off-label or non-registered products], including the potential for adverse reactions or ineffective treatment. Veterinarians must be well-informed about the responsibilities associated with this use, which include ensuring that the decision is based on sound clinical judgment and that the use is clearly communicated with clients.'

Where patient management and treatment is impacted by lack of supply of a veterinary medicine, this should be noted in the patient's veterinary medical record.

More information:

- Intravenous fluid shortages: suggestions for management and conservation - ANZCVS
- Veterinary use of off-label or unregistered therapeutic products - AVA guidance
- IV fluids: Member alert + information for clients - AVA
- Managing a short-term feline core vaccine supply issue (covers changes to vaccination rules and requirements) - AVA
- Conservation strategies and safety considerations during intravenous (IV) fluids supply disruption - ACSQH

MONITORING OF ANAESTHETISED DOGS AND CATS



The Anaesthesia and Analgesia Chapter of the Australian and New Zealand College of Veterinary Scientists (ANZCVS) has produced a position statement defining the minimum standards for the monitoring of anaesthesia in companion animal practice.

The position statement provides guidance on the minimum requirements for adequate monitoring during anaesthesia, to optimise animal safety.

The Board recommends the approach outlined in the position statement to the profession.

POSITION STATEMENT

During anaesthesia of healthy dogs and cats there must be a person dedicated to the role of monitoring and recording the physiological status of the animal and any events related to the safe conduct of anaesthesia. This person must be appropriately trained and experienced or must work under direct supervision of someone who is appropriately trained and experienced.

In addition to clinical observations of the animal (palpation of a peripheral pulse, measurement of pulse rate and respiratory rate, observation of mucous membrane colour/ capillary refill time and subjective assessment of depth of anaesthesia), monitoring of anaesthesia should be complimented by the use of equipment including a pulse oximeter, capnograph, blood pressure monitor, and thermometer. A record of anaesthesia must be created in every case.

Animals must always be observed from the time that drugs are first administered to the time that adequate recovery from the procedure has been confirmed.

JAPANESE ENCEPHALITIS SEASON IS LOOMING

FROM AGRICULTURE VICTORIA

With summer approaching, this is a reminder to include Japanese Encephalitis (JE) in your diagnostic lists for both pig reproductive failures and horse neurological conditions.

JE first appeared in Victoria in early 2022, when 23 piggeries in northern Victoria were confirmed as infected, and many suspicious equine cases were reported and investigated.

While no cases were confirmed in the 2022-23 or 2023-24 summers, concern still remains that JE will be seen in future summer seasons. This zoonotic disease is now considered to be sporadically and seasonally endemic in mainland eastern Australia, with the likelihood that the virus will be seen again in wet summers associated with a proliferation of water birds and mosquitoes.

Agriculture Victoria continues to closely monitor the situation, actively supporting veterinary investigation through the [Significant Disease Investigation \(SDI\) program](#) for disease in pigs presenting with clinical signs consistent with JE virus infection.

In equines many cases are asymptomatic, with most clinical cases also being mild. However, more severe encephalitis can occur and may be fatal. Signs include:

- fever, lethargy, and anorexia
- neurological signs which vary with severity of the clinical disease.

Neurological signs can include ataxia, difficulty swallowing and impaired vision. In rare cases, a hyperexcitable form occurs. As these signs can also be present in cases of Hendra virus, take precautionary measures with any investigation.

In pigs, adult sows do not show overt signs of illness, but if infected during pregnancy they may abort or give birth to litters of mummified and stillborn or weak piglets, some with neurological signs. Boars may experience fever, lethargy, infertility and swollen testicles.

In livestock, clinical JE is generally seen after mid-summer. However, any prolonged wet, hot weather could see a rise in in the number of suitable mosquito species that would support widespread infection.

The most important strategy to reduce the risk of

Continued next column...

infection with the JE virus in people and livestock is to avoid/protect from mosquito bites.

JE remains a notifiable disease, so if you suspect Japanese encephalitis in any animal immediately phone the all-hours Emergency Animal Disease Watch Hotline on **1800 675 888**.

More information:

- [Japanese encephalitis - Agriculture Victoria](#)
- [Current situation of Japanese encephalitis in livestock in Victoria](#)

CYBER SECURITY IS EVERYONE'S BUSINESS

CYBER SECURITY AWARENESS MONTH 2024

The Board encourages all veterinary practitioners, stakeholders in the profession and the general public to take time now to talk about cyber security with family, friends and colleagues, and urge them to take protective actions if not already taken.

Cybercrime reports are increasing and malicious cyber activity continues to pose a risk to every Australian. The Board can attest to this. We've seen a recent uptick in suspect emails, for example we've received (and deleted) invitations to download docs from google drive from spoofed accounts of legitimate business employees and several requests from "vets" to email them because they have laryngitis (a known gift-card scam).

The Australian Government's Cyber Security Centre (ACSC) says that we can all make Australia the most secure place to connect online by taking 4 [simple steps](#) to improve cyber security:

- Turn on multi-factor authentication.
- Keep your devices and software up to date.
- Use strong and unique passwords, such as a passphrase.
- Recognise and report phishing.

Businesses can take more steps, including

- accessing the ACSC's [resources for business](#), and
- using the ACSC's [exercise in a box](#) to test their current cyber threat response and identify ways to improve.

More information: [October Cyber Security Awareness Month](#)

PREPARING FOR HPAI H5N1 IN AUSTRALIA FROM DEPARTMENT OF ENERGY, ENVIRONMENT AND CLIMATE ACTION

Avian influenza has been back in the news recently as Australia prepares for a potential H5N1 outbreak. Australia is the only continent that is free of the global strain of high pathogenicity avian influenza (HPAI) called H5N1.

The global strain of HPAI called H5N1 differs from other strains such as the H7 strain, which infected poultry at 8 Victorian properties and required an intensive response from Agriculture Victoria and other agencies. H5N1 is different in that it not only causes significant mortality in poultry but can also cause the deaths of large numbers of wild birds and some mammals.

There is no effective treatment for HPAI H5N1 and the prognosis for birds or mammals affected with the disease is poor.

To date, HPAI H5N1 has not been detected in Australia. However, the global situation means there is an increased risk of this disease arriving in Australia and outbreaks in local wild birds and other native wildlife.

The spread of avian influenza to people is rare but may occur with some strains of the virus if there is close contact with infected animals or their droppings, or with heavily contaminated environments. Good occupational health and safety practices when working with animals will minimise the risk of transmission.

As the lead agency in Victoria for biosecurity responses, Agriculture Victoria is working with the Biodiversity Division and other partners to revise the Government's emergency animal disease plans. Lessons learnt from the response to the H7 outbreak are being incorporated into the response.

Veterinary practitioners and the public can prepare by informing themselves about H5N1 and what to do in case of an outbreak.

Avian influenza is a nationally notifiable disease. If you suspect a bird or other animal is showing clinical signs of the disease, it must be reported to hotlines or local Agriculture Victoria Animal Health & Welfare Staff (see contact info on the right).

Persons in close contact with infected animals or materials who develop flu-like symptoms should seek medical advice immediately and contact the Communicable Disease Prevention Unit of Vic Health (see contact info on the right).

Essential resources to help you prepare

The information below will assist veterinary practitioners, animal owners and the general public to recognise the clinical signs of HPAI H5N1 and prepare for a potential outbreak:

- [VetWatch Newsletter HPAI H5N1 Special Edition](#) from Victorian Chief Veterinary Officer: articles from experts, links to webinar recordings and other resources
- [Incident information](#) from Wildlife Health Australia: includes [HPAI advice factsheet for veterinarians and animal health professionals](#), national and international (WHO) guidelines, and many other resources
- Agriculture Victoria avian influenza pages: [Avian influenza factsheet](#) and [current situation with H7 outbreak in Victoria \(different type of avian influenza\)](#).
- For domestic chicken owners: [Protecting domestic poultry and birds from emergency animal diseases](#) & [Care for your coop](#)
- Print this A3 poster: [H5 Avian Influenza Preparedness](#). Veterinary practices can put this poster up in their waiting room and share it with clients. The main message is to BE AWARE of sudden death or signs of sickness in wild birds and wildlife, AVOID contact with sick or dead animals, RECORD what you see and REPORT specified incidents. Electronic version here: [High pathogenic avian influenza](#) (from www.wildlife.vic.gov.au DEECA)
- Human health information: [Avian influenza \(bird flu\)](#), from the Victorian Department of Health

CONTACTS

- Emergency Animal Disease Hotline - **1800 675 888** or via **Notify Now Animal Diseases App** download from app stores (AgVic Gaia Resources)
- Wildlife hotline **136 186** - for reporting 5 or more sick or dead wild birds or even one sick or dead penguin, pelican, bird of prey, black swan or marine mammal
- VicEmergency Hotline for poultry farmers, backyard flock owners or bird owners to report bird deaths - **1800 226 226**
- Communicable Disease Prevention Unit of Vic Health - **1300 651 160** (24 hours)
- Office of the Chief Veterinary Officer - cvo.victoria@agriculture.vic.gov.au

APPRENTICESHIP GRANTS FOR VET NURSING QUALIFICATIONS

As there is a shortage of qualified veterinary nurses in Australia, a number of veterinary nursing and related qualifications are on the Commonwealth Government’s [Australian Apprenticeships Priority List](#).

Both existing or new staff *and* their employers may be able to access grants of up to \$5,000 to support completion of a qualification on the priority list.

Qualifications include the Certificate IV in Veterinary Nursing, and other qualifications in Animal Technology, Captive Animals, Equine Allied Health & Wildlife and Exhibited Animal Care.

More information:

- Staff - [Apprentice Training Support Payment](#)
- Employers - [Apprentice Employment Incentives for Employers](#)
- [Busy at Work](#) - 13 28 79 (contracted by Commonwealth Government to supply above services)

NEW SPECIALISTS IN VICTORIA

Congratulations to the veterinary practitioners newly endorsed as specialists from August 2024:

- Dr Smitha Georgy, Specialist in Veterinary Anatomical Pathology from 13 August 2024
- Dr Susan Ciaravolo, Specialist in Small Animal Medicine from 10 September 2024
- Dr Christopher Franklin, Specialist in Small Animal Surgery from 10 September 2024
- Dr Derniese Goh, Specialist in Small Animal Surgery from 10 September 2024
- Dr Blaine McCracken, Specialist in Small Animal Surgery from 10 September 2024
- Dr Gaby van Galen, Specialist in Equine Surgery from 10 September 2024
- Dr Denis Verwilghen, Specialist in Equine Dentistry from 8 October 2024.

More information: [Board Guideline 17 - Emergency veterinary services and specialist veterinary services](#)

SEE NEXT PAGE FOR SUPPORT CONTACTS AND OTHER INFO

NEW ONLINE REPORTING AND SURVEILLANCE OF INHERITED DISEASES IN ANIMALS

The Sydney School of Veterinary Science has launched a service called [AHIDA, the Anstee Hub for Inherited Diseases in Animals](#), where animal owners or veterinarians can submit information about animals with suspected or confirmed inherited diseases.

Most animals carry both desirable and undesirable variants in their genes. Some of these variants can cause inherited diseases. Published information about inherited traits and diseases in animals is summarised at [OMIA - https://omia.org](#).

Information about emerging inherited diseases, or information about how common an inherited disease is in Australian animals, is often limited - hindering development of effective ways to reduce the risk of affected animals being born.

The purpose of AHIDA is to facilitate surveillance, reporting and management of inherited diseases in animals in Australia. Veterinarians and animal owners can submit information about inherited diseases. Anonymous submissions are available.

The service also aims to connect interested parties together. Vets and animal owners can ask to be connected with researchers world-wide. Researchers can register their research interests on AHIDA to be connected with submitters.

AHIDA is a not-for-profit service (with University of Sydney ethics approval) supported by the Ronald Bruce Anstee Bequest.

Go to: [AHIDA - Anstee Hub for Inherited Diseases in Animals](#)

Questions? ahida.admin@sydney.edu.au

YOU, YOUR PET AND YOUR VET
A Vetboard Victoria Factsheet

What do you need to know when it comes to caring for your pet?

There are many important considerations when it comes to the responsibility of pet ownership.

- health conditions your pet might be prone to
- your financial capacity to take care of your pet
- the likely total cost of caring for your pet over its lifetime
- whether to obtain pet insurance

You should make your pet's health and welfare a priority. This includes:

- vet check-ups, vaccination and parasite prevention
- ensuring your pet's basic needs are met (providing healthy food, water and a nurturing and safe living environment)

What can you expect from your vet?

As an owner, you can reasonably expect:

- respect, and professional behaviour
- an accurate and honest representation of the vet's services, qualifications, and their expected outcomes for pet care
- treatment options, risks, likely outcomes and costs
- correct medication, dosages, timing

What can your pet expect from you?

As a pet owner, you should expect:

- respect, and polite behaviour
- open and honest communication including full disclosure of your pet's history and medications
- a commitment to prioritising the health and wellbeing of your pet
- prompt payment for services

What to your pet if you get sick?

It's important to know what to do if your pet gets sick. What to do:

- know when to seek veterinary care
- know where the vets in your area are, and when they are open
- have an alternative option for when your regular vet is not open
- have an emergency plan if you can't get immediate access to emergency care
- know how to contact your vet
- know your vet's contact details to their home
- have a list of vets to contact if you can't give your vet's contact details to their home
- know how to contact your vet if you cannot be contacted in an emergency

Available to share with clients

Share our factsheet with tips for pet owners on working with veterinary practitioners to help care for their pets:

- www.vetboard.vic.gov.au > [Public > You, your pet and your vet](#)

SUPPORT AND INFORMATION FOR VETERINARY PRACTITIONERS

VETBOARD VICTORIA RESOURCES

- [Videos and factsheets about veterinary boards, how they handle complaints and how you can respond to or prevent complaints](#)
- [Download proof of registration or update your contact details via My Account](#)
- [Registration](#)
- [Complaints](#)
- [Guidelines for appropriate standards of veterinary practice and veterinary facilities](#)
- [Veterinary Practice Act 1997](#)
- [Other laws relating to veterinary practice including Drugs, Poisons and Controlled Substances Act 1981](#)
- [About the Board and Board members](#)
- [Annual reports](#)

MEDICINES, MICROCHIPPING, RADIATION

Medicines & Poisons Regulation (MPR)

Branch, Victorian Department of Health

- [Medicines and Poisons Regulation](#)
- [Legislative requirements for vets](#)
- [Factsheet – Key requirements for vets](#)
- [MPR Enquiry form](#)

Prescribing guidelines and resources:

- [AMR Vet Collective antimicrobial guidelines](#)

Microchipping

- [Authorised implanter course for veterinarians](#) - Victorian Division AVA
- [Greyhound Microchip Registry 8329 1139](#)

Radiation Safety Unit, Vic Health:

- [Individual use licences](#)
- [Management licences](#)

COVID-19 INFORMATION

- National hotline: **1800 020 080**
- [COVIDSafe Plan](#)

Disclaimer: Some links in this newsletter direct you to the websites of third-party organisations which are responsible for and/or may be able to assist you with the item's subject matter. The Veterinary Practitioners Registration Board of Victoria has no control over and is not responsible or liable for the content of any third-party website.

SUPPORT FOR VETS

- **Australian Veterinary Association:** [telephone counselling service](#) 1300 687 327 **both** for AVA members **and** the vet professionals who work for them
- **AVA THRIVE** [veterinary wellness portal](#)
- **Lifeline** 13 1114 & [Get help](#)
- **Beyond Blue:** 1800 512 348 & [Get mental health support](#)
- **SANE** 1800 187 263 & [SANE services](#)
- **1800RESPECT** 1800 737 732 & [website](#)
- **Mensline Australia** 1300 789 978 & [website](#) (delivered by Lifeline)
- **Head to Health** [Australian Gov resources](#)
- **Mental health support** [Victorian Gov resources](#)

AGRICULTURE VICTORIA INFORMATION

Emergency Disease Hotline

- 1800 675 888 to report suspected emergency diseases - staffed by vets 24 hours a day, 365 days a year.

Local animal health staff

- Call 136 186 to get in touch with Agriculture Victoria District Veterinary Officers and Animal Health Officers located throughout Victoria.

Avian flu contacts

- See list on page 8 of this newsletter

General contacts

- Customer service line 136 186
- Email biosecurity queries or feedback to animal.biosecurity@agriculture.vic.gov.au
- Email animal welfare queries to pet.welfare@agriculture.vic.gov.au

General information

- www.agriculture.vic.gov.au
- [Biosecurity and animal diseases](#)
- [National biosecurity training hub](#)
- [VetWatch newsletter](#) – information about animal disease surveillance
- [Antibiotic resistant infections and information for veterinarians and veterinary staff](#)
- [Animal Welfare Victoria](#)
- [Livestock and animals](#)
- [Pet care](#)